1 2 3 4 5 6 7	Eric C. Kastner (SBN 53858)  eck@kastnerkim.com J. Philip Martin (SBN 55100)  jpm@kastnerkim.com KASTNER   KIM LLP 3150 De La Cruz Blvd. Suite 206 Santa Clara, CA 95054 Tel.: (650) 967-7854  Attorneys for Plaintiff,  DANIEL WARMENHOVEN .		
8 9 10	UNITED STATES DISTRICT COURT NORTHERN DISTRICT OF CALIFORNIA		
11 12 13 14 15 16 17 18	DANIEL WARMENHOVEN,  Plaintiff,  v.  NETAPP, INC., A DELAWARE CORPORATION, NETAPP EXECUTIVE MEDICAL RETIREMENT PLAN,  Defendants,	Case No. 5:17-cv-02990 - BLF  DECLARATION OF DANIEL WARMENHOVEN IN SUPPORT OF PLAINTIFF DANIEL WARMENHOVEN'S OPPOSITION TO DEFENDANTS' MOTION FOR SUMMARY JUDGMENT ON EQUITABLE REMEDIES  Date: October 13, 2022 Time: 9:00 a.m. Courtroom: 3	
<ul><li>20</li><li>21</li><li>22</li><li>23</li><li>24</li><li>25</li><li>26</li><li>27</li></ul>	DECLARATION OF DANIEL WARMENHOVEN DEFENDANTS' MOTION FOR SUMMARY JUD		

CASE No. 5:17-cv-02990

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I, DANIEL WARMENHOVEN, declare as follows:

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I am a plaintiff in this action. The following facts are within my personal

#### I was employed by NetApp, Inc. ("NetApp" or "the Company") from 1994 to

#### 2014. I was the Chief Executive Officer ("CEO") from 1994 until Aug, 2009 and from 1994 to

knowledge and if called and sworn as a witness I am competent to truthfully testify thereto. I

make this declaration in support of Plaintiff's opposition to Defendants' Motion for Summary

- 2014 was a member of the Board of Directors. I was the CEO in 2003 when the subject of
- creating a Medical Plan for retired executives first arose. Jeff Allen ("Allen"), then CFO at
- 10 NetApp was planning to retire and advised me he was concerned about his ability to secure
- 11 medical insurance given a pre-existing condition as he would not be eligible for Medicare upon
- 12 retirement. I then directed NetApp's Human Resources ("HR") officers, Chris Carlton, Vice
- 13 President, and Marge Correa, the HR Director to work with the NetApp Board of Directors'
  - Compensation Committee ("Comp Committee") which had jurisdiction over all NetApp
    - employee benefits plans, to see if it was possible to devise a medical insurance plan for senior
    - executives at Allen's level.

Judgment on Equitable Remedies.

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- 3. After nearly two years of consideration, the Comp Committee, comprised of
- Board members Carol Bartz, Bob Wall and Mark Leslie, adopted an Executive Medical
- Retirement Plan (the "Plan") on behalf of the Committee in May, 2005. The Plan, chiefly
- 20 drafted by Ms. Correa, was set forth in a Power Point, a true and correct copy of which is
  - attached hereto as **Exhibit 1**. No other documents were created by NetApp relating to the Plan at
  - that time.
    - 4. At the same time, NetApp changed the insurance company which administered
- the NetApp employee medical plan from Great West to Cigna Insurance Company ("Cigna").
  - Cigna, in turn, became the administrator of the Plan, which then only had one beneficiary, Allen,

who retired as a full time NetApp employee in May, 2005 and then became a member of the Board of Directors.

- 5. As stated in the Plan (Exhibit 1) it was designed to confer lifetime medical benefits on the Senior Executives and their spouses with the Plan becoming supplementary to Medicare when the executive and the spouse reached the age of 65. In addition, children of the retired executive would be covered by the Plan until age 26. The Plan was self-funded; that is, NetApp paid all premiums for the executive's coverage. Nothing in the Plan document (Ex. 1) provided that NetApp could amend or terminate the Plan after an eligible executive retired and he and his spouse were covered. And that was my intent and expectation when I directed the Plan to be created.
- 6. At no time during my tenure at NetApp through 2015 did any member of the Comp Committee or HR advise me that language in the Cigna Certificate of insurance in any way created a right in NetApp to terminate the Plan. The Plan was a factor in my decision to continue as CEO of NetApp until I met the age and years of service requirement to vest the lifetime medical benefits upon my retirement.
- 7. Cigna was replaced as the NetApp employee medical plan insurance administrator in 2013 in favor of United Healthcare ("UHC"). Similar to Cigna, UHC then became the administrator of the Plan which by 2013 had two additional beneficiaries Steve Gomo, the Chief Financial Officer who retired in early 2011 and Edward Deenihan who retired in 2013. UHC also prepared Certificates of Insurance it provided to NetApp. Nothing in the UHC Certificate I saw purported to delegate to NetApp the right to amend or terminate the Plan.
- 8. Shortly before my retirement as CEO in 2014 I was given a copy of the Plan, still in the form of the Power Point presentation. A true and correct copy of that document dated March 2014, is attached hereto as **Exhibit 2**. Other than a slight to change the pool of eligible senior executives from SEC Section 16b officers to Executive Vice Presidents, the terms of the

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Plan were the same since its inception: a lifetime benefit for myself and my wife and for my children until age 26. In none of the communications with HR about my impending retirement and eligibility for the Plan was there any suggestion the Plan could be amended or terminated and no such language was contained in Exhibit 2.

- 9. In the summer of 2016, I was advised by both George Kurian, then the CFO, and Gwen McDonald, HR Executive Vice President, that the Comp Committee had decided to terminate the Plan and substitute, for a period of 3 years, individual insurance policies for all Plan beneficiaries (including myself) and then end the Plan in December, 2019 with a payment to be made to beneficiaries subject to signing a release agreement. I attended a meeting with Kurian, McDonald, and most of the beneficiaries on August 25, 2016 and received documents explaining the new Plan. At no time in that meeting, or later in meetings and conversations I had with Kurian, McDonald, and NetApp Board of Director Chairman Mike Nevins, did any NetApp officer explain the source of the Company's claimed right to terminate the Plan. There was no mention of ERISA or that the Plan was part of the insurance documents now before the Court. The word ERISA was never raised or mentioned by the Company until this lawsuit was initiated.
- 10. As with all the other Plan beneficiaries I purchased individual policies with Anthem Blue Cross and Express Scripts that was supplementary to Medicare coverage for which I became eligible in 2015. My wife also became Medicare eligible and our Medicare premiums combined are approximately \$1,006,80 per month. The supplemental plans with Anthem & Express Scripts cost approximately \$430.00 per month for both of us combined, which we are still paying to date.

I declare the foregoing to be true under penalty of perjury. Executed this  $4^{+}$  day of July, 2022 in Mountain View, California.

## **EXHIBIT** 1



## Executive Retirement Medical Plan



### **Executive Retirement Medical Plan**

- Provide medical coverage beyond the COBRA maximum benefit period to a defined group of retiring executives as a fully-insured plan
- Participation
  - Minimum 5 years of service
  - Minimum age 50
  - Retired 16b officers (all executives who are or have been 16b officers)
    - Easily identified group no question as to who is eligible
    - · Substantially different responsibilities when compared to other executives
    - Small group limits the cost time to evaluate the impact
  - Age + (years of service doubled) is equal to or greater than 65
  - Coverage for retiring executive and spouse/eligible children if applicable
- ▶ Implement May 1, 2005



### Executive Retirement Medical Plan - con't

- CIGNA HealthCare Open Access Plus plan for Retirees
  - Fully insured Plan (Highlights document attached)
  - Rate Structure through 12/31/06

Employee only

\$740.26

EE + Spouse

\$1,470.03

EE + Family

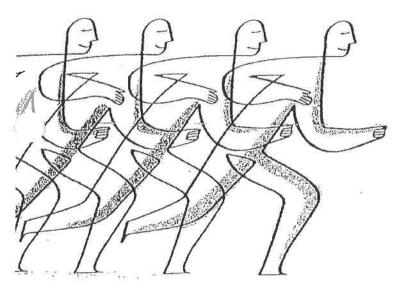
\$2,747.11

- 100% paid by Company no premium contribution from retiree
- Medicare COB with Medicare primary
- Unlimited lifetime maximum benefit
- Change of Control provision
  - Plan will include a provision such that in the event of a change of control, the acquiring company must provide a Retiree Medical Plan that is substantially equivalent to our Plan and keep the Plan in place for the lives of the eligible employees

## EXHIBIT 2

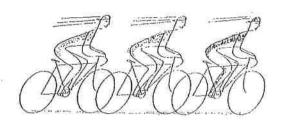


Go further, faster



# Executive Medical Retirement Plan

March 2014



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NETAPP 001825





#### **Executive Medical Retirement Plan**

- Executive Medical Retirement Plan adopted by the Company as a method to retain a defined group of senior executives
- Plan provides medical benefits for the retiree's lifetime
- Eligibility:
  - Executive Vice President or above
  - Age and Service Requirements
    - Minimum age 50, and

■ Age plus 2 x Service => 65

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#### **Executive Medical Retirement Plan**

- No retiree contributions required
- Eligible dependents include spouse/partner and children
- Benefits coordinated with Medicare for retirees age 65 and above
- Medical benefits are fully insured withUnitedHealthcare
  - Plan design is a PPO (90% network/80% outof-network)

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### Medical Plan Design

Benefit Provision	In-Network	. Out-of-Namvork
Annual deductible	\$250/\$750 (indiv/family)	\$250/\$750 (indiv/family)
Office visit	\$20 copay	20% of charges <sup>2</sup>
Lab & X-ray	10% of charges1	20% of charges <sup>2</sup>
Outpatient services	10% of charges1	20% of charges <sup>2</sup>
Inpatient hospital	10% of charges	20% of charges <sup>2</sup>
Emergency room	\$100 copay	\$100 copay or 20% <sup>3</sup>
Annual Out-of-Pocket Maximum	\$1,500/\$3,0004	\$5,000/\$10,0004
Lifetime maximum	Unlimited	Unlimited

<sup>2</sup> Services are subject to calendar year deductible and reasonable & customary charge limitations

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<sup>&</sup>lt;sup>1</sup> Services are subject to calendar year deductible

<sup>&</sup>lt;sup>3</sup> Care provided at in-network levels if it meets 'prudent layperson' definition of an emergency. Otherwise 20% of charges

<sup>4</sup> Includes plan deductible